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UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.	920476-94756
First Inventor	Sproat
Title	Improved Network Service Provider Architecture ...
Express Mail Label	EV 272 183 863 US

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original, and a duplicate for fee processing)	7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.	8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
3. <input checked="" type="checkbox"/> Specification [Total Pages 23] (preferred arrangement set forth below)	a. <input type="checkbox"/> Computer Readable Form (CRF)
- Descriptive title of the invention	b. <input type="checkbox"/> Specification Sequence Listing on:
- Cross Reference to Related Applications	i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or
- Statement Regarding Fed sponsored R & D	ii. <input type="checkbox"/> Paper
- Reference to sequence listing, a table, or a computer program listing appendix	c. <input type="checkbox"/> Statements verifying identity of above copies
- Background of the Invention	
- Brief Summary of the Invention	
- Brief Description of the Drawings (if filed)	
- Detailed Description	
- Claim(s)	
- Abstract of the Disclosure	
4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 9]	
5. Oath or Declaration [Total Pages 4]	
a. <input type="checkbox"/> Newly executed (original or copy)	9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))
b. <input checked="" type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 18 completed)	10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney (when there is an assignee)
i. <input type="checkbox"/> <u>DELETION OF INVENTOR(S)</u> Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).	11. <input type="checkbox"/> English Translation Document (if applicable)
6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76	12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:	13. <input type="checkbox"/> Preliminary Amendment
<input checked="" type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No.: 09/218,111	14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)
Prior application information: Examiner <u>Nguyen</u> Group / Art Unit: 2665	15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)
For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.	16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
19. CORRESPONDENCE ADDRESS	17. <input type="checkbox"/> Other:

Customer Number: 23644 or Correspondence address below

Name _____

Address _____

City _____ State _____ Zip Code _____

Country _____ Telephone _____ Fax _____

Name (Print/Type) William M. Lee, Jr.Registration No. (Attorney/Agent) 26,935Signature William M. LeeDate September 5, 2003

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22151 US PRO
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16563 U.S. PTO

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FEE TRANSMITTAL for FY 2003		<i>Complete if Known</i>	
		Application Number	
		Filing Date	
		First Named Inventor	Sproat
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Examiner Name	
		Group Art Unit	
TOTAL AMOUNT OF PAYMENT		(\$)	\$750.00
		Attorney Docket No.	920476-94756

METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)																																																																																																																																							
<input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None <input type="checkbox"/> Deposit Account: Deposit Account Number 12-0913 Deposit Account Name		3. ADDITIONAL FEES <table border="1"> <thead> <tr> <th>Large Entity</th> <th>Small Entity</th> </tr> </thead> <tbody> <tr> <td>Fee Code (\$)</td> <td>Fee Code (\$)</td> </tr> <tr> <td>1051</td> <td>2051</td> </tr> <tr> <td>130</td> <td>65</td> </tr> <tr> <td>1052</td> <td>2052</td> </tr> <tr> <td>50</td> <td>25</td> </tr> <tr> <td>1053</td> <td>1053</td> </tr> <tr> <td>130</td> <td>130</td> </tr> <tr> <td>1812</td> <td>1812</td> </tr> <tr> <td>2,520</td> <td>2,520</td> </tr> <tr> <td>1804</td> <td>1804</td> </tr> <tr> <td>920*</td> <td>920*</td> </tr> <tr> <td>1805</td> <td>1805</td> </tr> <tr> <td>1,840*</td> <td>1,840*</td> </tr> <tr> <td>1251</td> <td>2251</td> </tr> <tr> <td>110</td> <td>55</td> </tr> <tr> <td>1252</td> <td>2252</td> </tr> <tr> <td>410</td> <td>205</td> </tr> <tr> <td>1253</td> <td>2253</td> </tr> <tr> <td>930</td> <td>465</td> </tr> <tr> <td>1254</td> <td>2254</td> </tr> <tr> <td>1,450</td> <td>725</td> </tr> <tr> <td>1255</td> <td>2255</td> </tr> <tr> <td>1,970</td> <td>985</td> </tr> <tr> <td>1401</td> <td>2401</td> </tr> <tr> <td>320</td> <td>160</td> </tr> <tr> <td>1402</td> <td>2402</td> </tr> <tr> <td>320</td> <td>160</td> </tr> <tr> <td>1403</td> <td>2403</td> </tr> <tr> <td>280</td> <td>140</td> </tr> <tr> <td>1451</td> <td>1451</td> </tr> <tr> <td>1,510</td> <td>1,510</td> </tr> <tr> <td>1452</td> <td>2452</td> </tr> <tr> <td>110</td> <td>55</td> </tr> <tr> <td>1453</td> <td>2453</td> </tr> <tr> <td>1,300</td> <td>650</td> </tr> <tr> <td>1501</td> <td>2501</td> </tr> <tr> <td>1,300</td> <td>650</td> </tr> <tr> <td>1502</td> <td>2502</td> </tr> <tr> <td>470</td> <td>235</td> </tr> <tr> <td>1503</td> <td>2503</td> </tr> <tr> <td>630</td> <td>315</td> </tr> <tr> <td>Independent Claims</td> <td></td> </tr> <tr> <td>3</td> <td>0</td> </tr> <tr> <td>Multiple Dependent</td> <td></td> </tr> <tr> <td>1202</td> <td>2202</td> </tr> <tr> <td>18</td> <td>9</td> </tr> <tr> <td>1201</td> <td>2201</td> </tr> <tr> <td>84</td> <td>42</td> </tr> <tr> <td>1203</td> <td>2203</td> </tr> <tr> <td>280</td> <td>140</td> </tr> <tr> <td>1204</td> <td>2204</td> </tr> <tr> <td>84</td> <td>42</td> </tr> <tr> <td>1205</td> <td>2205</td> </tr> <tr> <td>18</td> <td>9</td> </tr> <tr> <td colspan="2">SUBTOTAL (1) (\$)</td> <td colspan="2">\$750.00</td> </tr> <tr> <td colspan="2"> 2. EXTRA CLAIM FEES FOR UTILITY AND DESIGN PATENTS Extra Claims Fee from below Fee Paid Total Claims 16 -20** = 0 X 0 = 0.00 Independent Claims 3 - 3** = 0 X 0 = 0.00 Multiple Dependent </td> <td colspan="2"> Fee Description Fee Code (\$) </td> </tr> <tr> <td colspan="2"></td> <td colspan="2"> Claims in excess of 20 Independent claims in excess of 3 Multiple dependent claim, if not paid ** Reissue independent claims over original patent ** Reissue claims in excess of 20 and over original patent </td> </tr> <tr> <td colspan="2">SUBTOTAL (2) (\$)</td> <td colspan="2">\$0.00</td> </tr> <tr> <td colspan="2">*or number previously paid, if greater; For Reissues, see above</td> <td colspan="2">*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$)</td> </tr> <tr> <td colspan="2"></td> <td colspan="2">\$0.00</td> </tr> </tbody> </table>		Large Entity	Small Entity	Fee Code (\$)	Fee Code (\$)	1051	2051	130	65	1052	2052	50	25	1053	1053	130	130	1812	1812	2,520	2,520	1804	1804	920*	920*	1805	1805	1,840*	1,840*	1251	2251	110	55	1252	2252	410	205	1253	2253	930	465	1254	2254	1,450	725	1255	2255	1,970	985	1401	2401	320	160	1402	2402	320	160	1403	2403	280	140	1451	1451	1,510	1,510	1452	2452	110	55	1453	2453	1,300	650	1501	2501	1,300	650	1502	2502	470	235	1503	2503	630	315	Independent Claims		3	0	Multiple Dependent		1202	2202	18	9	1201	2201	84	42	1203	2203	280	140	1204	2204	84	42	1205	2205	18	9	SUBTOTAL (1) (\$)		\$750.00		2. EXTRA CLAIM FEES FOR UTILITY AND DESIGN PATENTS Extra Claims Fee from below Fee Paid Total Claims 16 -20** = 0 X 0 = 0.00 Independent Claims 3 - 3** = 0 X 0 = 0.00 Multiple Dependent		Fee Description Fee Code (\$)				Claims in excess of 20 Independent claims in excess of 3 Multiple dependent claim, if not paid ** Reissue independent claims over original patent ** Reissue claims in excess of 20 and over original patent		SUBTOTAL (2) (\$)		\$0.00		*or number previously paid, if greater; For Reissues, see above		*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$)				\$0.00	
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SUBMITTED BY		<i>Complete (if applicable)</i>	
Name (Print/Type)	William M. Lee, Jr.	Registration No. Attorney/Agent	26,935
Signature		Date	September 5, 2003

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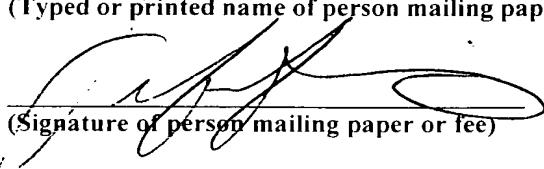
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Jennifer J. Ramirez
(Typed or printed name of person mailing paper or fee)


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